PTC/SB/06 (08-03)
Approved for use through 7/31/2008. OM8 0851-0032
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Г	PAT	FENT APPL	ICAIR	א רכב טבי	LEKMINATIO	to a collection of a	nformation un	Applic	otays a valid OME	control number.
Substitute for Form PTO-875							109	275,0	138	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
_	FOR NUMBER FILE			D NUMBER EXTRA		RATE	FEE	7	RATE	FEE
BASIC FEE (37 CFR 1.16(a))								1	- ROSTE	
(3	TAL CLAIMS CFR 1.16(c))		minus 20 =					OR	X1 =	 -
(3)	DEPENDENT CLAE CFR 1.16(b))	MS	minus 3 ° °			X 5_ 0		OR	X 8_ •	
M	ALTIPLE DEPENDE	NT CLAIM PRESI	ENT -	(37 CFR 1.16(d))		+1		OR	+:	
* If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		or or	TOTAL	
		LAIMS AS AR				10172		J 0~	TOTAL	
	(Column 1)			(Column 2) (Column 3		SMALL ENTITY		OR		R THAN ENTITY
A TAB	7/2/04	Claims Remaining After Amendment		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
FNOMENT	Total (27 GFR 1.16(c))	40	Minus	"38	·a	X \$=		OR	x:18.	21:00
W	independent (37 GFR 1.16(b))	23	Minus	22	- /	x s=		OR	x .86-	8600
₹ -	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16			CFR 1.16(d))	+s=		OR	+290.	8	
	5-11-0	la				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	12200
		CLAIMS		(Column 2)	(Column 3)			_		r_{γ}
3 L		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL
AMENDMENT	Total (37 CFR 1.18(c))	· 40	Minus	38	1.2	X \$=	722	OR	X 8_ =	FEE
ᄩ	Independent (37 CFR 1_LE(b))	23	Minus	32	1-/	X 8 -		OR	X 5 .	
₹	FIRST PRESENTA	TION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	FR 1.16(d))	+5 0		OR		
	···					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	•	(Column 1)		(Column 2)	(Column 3)	•				
PMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
3	Total (17 CFR 1.15(c))	•	Minus	••	•	X \$ =	, EE	20	 	FEE
	Independent (37 CFR 1.18(b))	•	Minus	***	•	x s =		OR	X 8=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							OR	X \$=	
						TOTAL		OR OR	TOTAL ADD'L FEE	
	If the entry in col If the "Highest No If the "Highest No The "Highest No									

127.

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.